PTOSBOULTON) SCOT-190 BIND 900011 Ut ubnoin our of percented U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMERICE Under the Paperson Baduction Act of 1995, no persons are required to respond to a collection of information unless & displays a valid CMB control service. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 . Effective December 8: 2004 APPLICATION AS FILED - PARTI. OTHER THAN (Column 1) SMALL ENTITY (Coinin 2) OR SMALL ENTITY FOR HUMBER FILED HUMBER EXTRA RATE (1) BASIC FEE EEE (1) RATE FE((1) (37 CFR 1 16/11 (6) # (c)) NVA N/A. HVA 150.00 ŇIA 300,00 SEARCHFEE N/A . (37 CFR | 16(W. 14, oc fro) N/A NA \$250. NIA EXAMINATION FEE \$600 NA (37 CFR 1 16(0). (p), or (a)) N/A NA \$100 NA \$200 TOTAL CLAIMS (37.CFR 1 16(1) X\$ 25 munus 20 . X\$50 INDEPENDENT CLAIMS ÓR (37 CFR 1 16(N)) X100 X200 If the specification and drawings exceed 100 APPLICATION SIZE sheels of paper, the application size fee due is \$250 (\$125 for small entity) for each (37 CFR 116(4)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1:16(s) MULTIPLE DEPENDENT CLAIM PRESENT DI CFR I 16411 +180= +360= If the difference in column 1 is less than zero, enter "I in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) OTHER THAN (Column 2) (Column 3): **OR** SMALL ENTITY CLAIMS SMALL ENTITY HIGHEST REMAINING NUMBER PRESENT RATE (1) ADDI-AFTER RATE(\$) PREVIOUSLY EXTRA ADDI: w MENDMENT TIONAL TIONAL FEE (1) PAID FOR FEE (1) AT CER LING Minus **AMENDA** X\$ 25 X\$50 OR hospendens pr cen Linny Minus X100 X200 ΔĐ Application Size Fée (37 CFR 1.16(s)) PREST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.160) +180= +360= OR TOTAL TOTAL ADD'L FEE OR ADO'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING 8 NUMBER PRESENT RATE (\$) ADDI-RATE (\$) AFTER PREVIOUSLY PAID FOR EXTRA ADOL. MENDMENT TIOHAL TIONAL FEE (1) ENOMENT FEE (\$) Total Minus X\$ 25 troppendent . X\$50 OR Minus X100 X200 OR Application 6124 F40 (37 CFR 1.16(8)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (AT CFR 1.160)

If the entry in column 1 is best than the entry in column 2, write '0' in column 3.

If the "Highest Number Previously Paid For' IN THE SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For' IN THE SPACE is less than 3, enter "20".

The "Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

It collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is potented by 35 U.S.Q. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, buding pathenting, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case Any comments in a mount of the user of the complete this form and/or suggestions for reducing this burden, should be earn to the Chief Information Officer, U.S. Petient 1 Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

DRESS, SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

+180=

ADD'L FEE

TOTAL

+360£

TOTAL

OR

OR